

Dissemination of Research Results through
the Regional Postabortion Care (PAC) Initiative
for Francophone Africa

FRONTIERS Final Report:
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Introduction

In 2000 a network of USAID Cooperating Agencies (CAs), international and regional reproductive health organizations, and national partners began a dialogue to promote expansion of postabortion care (PAC) services in Francophone African countries. This network, called the “Francophone PAC Committee,” included Advance Africa, EngenderHealth, Family Care International (FCI), the World Health Organization (WHO), the International Training in Health Program (IntraHealth), Ipas, JHPEIGO, the Population Reference Bureau (PRB), the Support for Analysis and Research in Africa (SARA) Project, the Swedish International Development Agency, and the Population Council’s Frontiers in Reproductive Health Program (FRONTIERS). Also involved were a regional research and training organization, Centre de Formation et de Recherche en Santé de la Reproduction (CEFOREP), based in Dakar, and the Senegalese Ministry of Health. The committee established and coordinated a regional PAC initiative, the goal of which was to promote increased access to and quality of postabortion care services in Francophone African countries. The initiative sought to achieve this goal through three objectives:

- a) Create a favorable policy environment for the introduction and expansion of PAC services;
- b) Evaluate, document, and disseminate key regional and international lessons learned in implementing PAC services in Francophone West Africa;
- c) Encourage South-to-South exchange of technical and programmatic expertise for PAC expansion.

The committee organized a four-day conference titled “Reducing Maternal Mortality through Postabortion Care: A Workshop for Francophone Africa.” The conference aimed to disseminate groundbreaking PAC work conducted in Burkina Faso, Guinea and Senegal to introduce services at the national level and extend services to regional hospitals, and in Ghana, where PAC services have been decentralized to the primary healthcare level. Organizers promoted dissemination of experiences so that research could be adopted, adapted or replicated in several countries in the region. The conference’s ultimate goal was to establish sustainable and accessible quality PAC services in Francophone Africa.

Held at the Hotel Meridien President in Dakar, Senegal March 4-7, 2002, this conference brought together representatives from over a dozen West African and Francophone nations: Benin, Burkina Faso, Cameroon, the Central African Republic, Cote d’Ivoire, Ghana, Guinea, Haiti, Madagascar, Mali, Niger, Rwanda, Senegal, and Togo. The conference provided a forum to share best practices and country experiences in providing postabortion care. It aimed to assist countries in defining strategies to introduce and strengthen quality postabortion care services. The countries in the region are at different stages in developing service delivery systems, consolidating community and political support, and codifying standards through national legislative processes, and so had much to benefit from and offer one another.

The conference began with a one-day “mini-university” consisting of four periods of four concurrent sessions each. Delegates from each country team split up to attend as many of the 16 sessions as possible. The remaining three days were divided into plenary sessions and a series of concurrent roundtable discussions on specific topics related to PAC. Finally, representatives from each country met to develop an action plan for introducing or expanding PAC in their countries.

To continue the momentum set by the conference, the Francophone PAC Committee committed itself to several post-conference follow-up activities. Members worked to help each country introduce, expand, and reinforce PAC services through their action plans. Committee members supported country-level efforts to form networks and working groups to strengthen PAC policies and services. These working groups are well placed to advocate for greater attention to unsafe abortion and PAC services, to coordinate activities in-country, and to mobilize resources for PAC from governments as well as the national level donor community. To date, information from the CAs indicates that most of the participating countries have taken steps to implement the action plans developed during the conference for introducing or scaling-up PAC activities, namely Guinea, Mali, Benin, Togo, Burkina Faso, Senegal, and Niger.

FRONTIERS’ Contribution to the Initiative

Establishment of the Francophone PAC Committee

FRONTIERS staff participated in all of the Francophone PAC Committee meetings, starting in November 1999 when they developed a proposal with CEFORP to hold the regional conference. A series of informal meetings were held with CAs and other organizations in Washington D.C. and Dakar to brainstorm on the development and implementation of a PAC regional initiative and to plan the conference. The core group organized three 2-3-day planning meetings in Dakar; developed a protocol to describe strategic plans for the Regional PAC Initiative; and completed programmatic, technical and logistical plans for the regional conference. Over 10 CAs and several donors were involved in planning and financing the regional conference.

Inventory and package of key French language PAC materials

Based on extensive global experience in PAC research, FRONTIERS staff developed an inventory of the most relevant materials and created a package that was distributed to 300 conference participants. The following materials were included in the PAC package along with a list of all PAC materials available in French:

- Reports from the two operations research (OR) studies that first introduced PAC in Senegal and Burkina Faso under the Population Council’s Africa OR/TA Project. These provided lessons on the strategy and process for programs interested in the initial introduction of PAC services.
- The Population Council’s Program Brief titled “Advances and Challenges in PAC Operations Research,” which describes experiences with PAC in Asia, Latin America, and Africa.

- The PAC Program Briefs prepared during the Africa OR/TA Project, which summarize PAC OR experiences in Africa.
- Four FRONTIERS OR Summaries on PAC services.
- “Prevention and Management of Unsafe Abortion: A Guide for Action,” developed by FCI in collaboration with Ipas, the International Planned Parenthood Federation (IPPF), and the Population Council.

Leaflets describing the conference were also prepared to provide basic information such as on countries represented, number of participants, objectives, and expected outcomes. These leaflets were sent together with the materials package to participants prior to the conference.

Media involvement

Because PAC has traditionally been a topic of considerable sensitivity in the region, the PAC Committee decided to involve the media early in the process. The Senegalese Network of Journalists on Population and Development and Health came to three media briefings to enable them to write knowledgeably about the complex and sensitive topic of postabortion care. Experts from the Population Council, WHO, and IntraHealth introduced the journalists to this topic, explained the socio-cultural, legal, and political context for PAC, and gave them an overview of the conference and its goals.

A total of 26 Senegalese journalists participated in a briefing three days before the beginning of the conference. Several national and international experts, well-known obstetricians and gynecologists, members of the Senegalese Parliamentary Network on Population, the Senegalese Traditional Communicators Network on Population, and representatives of the Ministry of Health (MOH) were also invited. In addition, a briefing package on PAC was prepared for all the journalists. Members of the PAC Committee felt this package, like the short briefing meetings, was necessary and circulated it before the conference to reduce the likelihood of journalists writing or broadcasting misleading information on PAC. The second press briefing was organized for five journalists from Burkina Faso, Cote d'Ivoire, and Mali who were sponsored by the Population Reference Bureau's Pop'Mediafrique network to cover the conference. Pop'Mediafrique is a media network that has existed since 1996 and includes 15 print and broadcast editors and local health officials from Francophone West African countries.

During the conference, journalists received press kits on postabortion care and had access to a media center containing five computers with Internet connections and phone lines that allowed them to file their stories immediately. As a result, over 40 articles were published in both the local and international press, and over 15 radio broadcasts covering the conference were aired on various Dakar radio stations and Radio France Internationale (RFI). The journalists observed every part of the conference, including the “mini-university” presentations, plenary sessions, and country action plan meetings. In addition, the Senegalese government was represented by the Minister of Health, which resulted in a wide broadcast on national television. The media coverage of this conference provided a good example of how journalists can be effectively engaged in the dissemination of technical information, even in the case of highly sensitive topics such as PAC. Since the conference, *Le Soleil*, a Senegalese newspaper, has continued to publish articles on PAC, including a feature article in March 2003 highlighting the need for quality services. In July 2003 they printed an article about expanding PAC services to rural areas.

Selection and support of conference participants

Support was provided to select countries for the introduction and scaling-up of PAC services, and FRONTIERS supported conference participants from Senegal and Burkina Faso who were involved in the initial OR studies on PAC. Three participants from Burkina Faso were sponsored: two from the university teaching hospitals of Ouagadougou and Bobo-Dioulasso and one representative of the MOH. Ten participants from Senegal were sponsored: three from the sites where PAC was initially introduced (Hôpital Principal, Dantec Teaching hospital, and the Roi Beaudoin clinic), and seven from the regions of Kaolack and Fatick, where EngenderHealth and CEFORP were testing the decentralization of PAC to district hospitals through a FRONTIERS-sponsored Small Grant. Participants included district health management team members and providers from district hospitals and health centers.

During the conference, these delegates shared experiences, lessons learned, and obstacles from their work introducing PAC services. Participants also organized discussions highlighting the urgency of the risk to women who are endangered by lack of access to quality postabortion care services in the region. At the end of the conference, each country delegation drafted and presented its own action plan to expand or introduce postabortion care services in their respective countries. Action plans included OR as a method for introducing or improving PAC services.

Preparation of the conference report and disseminating the results

The FRONTIERS regional communications officer produced a summary of the conference proceedings. About 80 copies were printed and distributed to country and CA representatives. The Francophone PAC Committee, under the coordination of the SARA project, committed itself to coordinate and review the conference final report (see appendix). Member organizations selected areas of interest and expertise from an outline and drafted sections for the final report. FRONTIERS staff wrote the section related to OR. SARA project staff, with some support from FRONTIERS, JHPIEGO, PRB, and the Policy Project, compiled and edited the draft to produce a coherent report that could be

used by the global reproductive health community. Population Council staff in Dakar will print and distribute 500 copies of the French version of the report in West Africa using the mailing list compiled by the committee.

FRONTIERS also sponsored a CEFOREP staff member to attend the African OB/GYN Society meeting held in January 2002 in Bamako, Mali to make a presentation on PAC. Participation in this conference was used as an opportunity to further disseminate PAC materials through an exhibition organized at the meeting.

Country-level follow up activities

FRONTIERS staff have continued to be active in collaborating with members of the existing Senegal PAC committee and contributing to the policy and program decision-making process in Senegal. Regular meetings have been held to continue strengthening progress made in Senegal and to follow-up on FRONTIERS-supported Small Grant PAC activities with EngenderHealth at the rural district level, in liaison with IntraHealth's pilot test of PAC at the more decentralized, health center and community levels. Currently, CEFOREP has a contract with the SARA Project working with IntraHealth to provide technical assistance to regional groups on PAC.

Documentation of utilization of PAC OR results

OR studies on the feasibility of introducing PAC conducted by the Population Council's Africa OR/TA Project served as the basis for follow-up and expansion of services within Burkina Faso and Senegal, as well as other countries in the region. These cases served as excellent examples and provided valuable guidance to other countries interested in using these and other types of scientific evidence to introduce and develop national PAC services.

FRONTIERS staff devoted considerable effort to documenting the process by which the research results were disseminated and utilized at the national and regional levels and the factors leading to research utilization. The initial findings were presented at the PAC conference itself and at a WHO conference on research utilization in Geneva. They were also presented at the 2003 annual meeting of the American Public Health Association. As a result of the PAC conference presentation, half of the countries represented put OR projects into their action plans.

Conclusion

Operations Research has played a leading role among CAs and other institutions in the introduction of PAC services in the Francophone Africa region. Use of OR helped gain support for PAC services, which were previously seen as controversial in many of these countries, through a process that could be replicated or adapted in neighboring areas. Sharing between countries during the regional conference and country delegation meetings to develop action plans were elements of the success of the initiative. USAID, through its CAs, once again demonstrated its pioneering role in moving forward key reproductive health activities in the region and leveraging funds from other donors such

as WHO, the United Nations Population Fund (UNFPA), the Swedish Cooperating Agency, GTZ, the European Community, and the World Bank.

The PAC Initiative created a unique synergy for exchange of experiences and ideas among policymakers, public health professionals, the media, and donors. As the Senegalese Minister of Health noted, “The originality of this conference is the common desire of national and international experts to promote reproductive health by improving quality and access to services.” The full conference report is included in the appendix.